| 1   | ž., Š   | •   |                    | Application or Docket Number            |               |                  |              |             |                        |       |                     |  |
|---|---|---|--------------------|---|---------------|------------------|--------------|-------------|------------------------|-------|---------------------|--|
|   | PATEN   | Effective October 1, 2003                 |                    |   |               |                  |              |             | 09                     | 19    | 936                 | 21   |
|   |   | CLAIMS                                    | AS FILED<br>(Colur |   |               | (Column 2)       |              | SMALL ENTIT |                        | OF    |                     | R THAN<br>L ENTITY                               |
| 1   | OTAL CLAIN  | 1S  | ,                  |   |               |                  | ]            | ATE         | FEE                    | ٔ ٦   | RATE                | FEE  |
| F   | OR  |   | NUMBE              | NUMBER FILED                            |               | NUMBER EXTRA     |              | IC FE       | <del>-</del>           | ) OF  | BASIC FE            |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | n                  | minus 20=                               |               | *                |              | 9=          |                        | OF    | X\$18=              | <del> </del>                                     |
| INDEPENDENT CLAIMS  |   |   |                    | minus 3 = *                             |               |                  |              | X43=        |                        | OF    | 700                 | <del>                                     </del> |
| М   | ULTIPLE DEP   | ENDENT CLAIM                              | PRESENT            |   |               |                  | +1           | 1           | 7                      | \     |                     |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |   |                    |   |               |                  |              | TAL         | -                      | OR    | `                   |  |
|   |   |   | IAL                | L                                       | OR            |                  | <u></u>      |             |                        |       |                     |  |
| _   |   | (Column 1)                                |                    | (Colum                                  | n 2)          | (Column 3)       | SM           | ALL         | ENTITY                 | OR    |                     | R.THAN<br>ENTITY                                 |
| AMENDMENTA  |   | REMAINING<br>,AFTER<br>AMENDMENT          |                    | HIGHE<br>NUMB<br>PREVIOI<br>PAID F      | ER<br>USLY    | PRESENT<br>EXTRA | RATE         | TE          | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE                           |
|   | Total   | 1/3                                       | Minus.             | ** 3                                    | 2             | =                | X\$          | 9=          |                        | OR    | X\$18=              |  |
|   | Independent   | ENTATION OF M                             | Minus              | DENDENT                                 | 2             |                  | X4:          | 3=          |                        | OR    | X86=                |  |
| L   | 10111120  |   | OCTIFICE DE        | PENDENT                                 | CLAIN         | <u> </u>         | +14          | 5=          |                        | OR    | +290=               |  |
|   |   |   |                    |   |               |                  | TO<br>ADDIT. | TAL         |                        | OB    | TOTAL<br>ADDIT, FEE |  |
| _   |   | (Column 1)                                | 1                  | (Columi                                 |               | (Column 3)       | 7.0011.      |             | .'                     |       | ADDII. I EE         |  |
| 7 L   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO   | R             | PRESENT<br>EXTRA | RAT          | E           | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE                           |
|   | Total   | *   | Minus              | **                                      |               | = *              | X\$ 9        | =           |                        | OR    | X\$18=              |  |
| 5 L   | Independent   | MTATION OF MI                             | Minus              | ***                                     |               | =                | X43          | = ]         |                        | OR    | X86=                |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |   |                    |   |               |                  |              | =           |                        | OR    | +290=               |  |
|   |   |   |                    |   |               |                  |              | ΓAL         |                        |       | TOTAL               |  |
|   | (Column 1) (Column 2) (Column 3)  |   |                    |   |               |                  |              |             |                        | J., A | DDIT. FEE           |  |
| 3   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | 400                | HIGHES<br>NUMBEI<br>PREVIOUS<br>PAID FO | T<br>R<br>SLY | PRESENT EXTRA    | RATE         |             | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE                           |
| ַן בַּ  | otal  | *   | Minus              | **                                      | 1             | =                | X\$ 9:       |             |                        | OR    | X\$18≃              |  |
| L   | ndependent  |   | Minus              | ***                                     |               | =                | X43=         |             |                        | - 1   | X86=                |  |
|   | RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                    |   |               |                  | +145=        | +           |                        | OR -  |                     |  |
| lf t  | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                    |   |               |                  |              |             |                        | DR L  | +290=               |  |
| or the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  ADDIT. FEE                  |   |   |                    |   |               |                  |              |             |                        |       |                     |  |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |                    |   |               |                  |              |             |                        |       |                     |  |